# Weekly BDDS Meeting for Case Managers and Providers April 9, 2020



#### Welcome and Today's Agenda





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- Introductions
- DDRS Goals for COVID-19 Efforts
- Updates and Clarifications: Temporary Policy Changes Issued April 3, 2020
- FAQs/Scenarios
- Anticipated Policy Updates
- Additional System Updates
- Next Steps



#### DDRS Goals for COVID-19 Efforts





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elp prevent the spread of COVID-19 and keep people alive

Operationalize flexibilities

Provider network maintained

Empower person-centered decision-making for self-advocates, families, case managers, and providers



#### DDRS Goals for COVID-19 Efforts

- How we are working to accomplish these goals
  - Being person-centered and reinforcing personcentered thinking in all that we do
  - Balancing what is Important To and Important For people with disabilities, their families, case managers, and providers - working to develop a sense of normalcy by minimizing change, promoting routine, and encouraging individualized responses.
  - Collecting meaningful data that will help us respond to immediate needs, as well as address future needs
  - Operating within Executive Orders and other relevant regulations
  - Maintaining on-going, active communication with stakeholders
  - Promoting the use of integrated support options that address the holistic needs of individuals and families

#### **BDDS Temporary Policy Guidance**

- Updates and FAQ are published and posted to DDRS COVID-19 Guidance Page
  - Guidance to Families on COVID-19 Temporary Policy Changes
  - Guidance on the Provision of Case Management and COVID-19
  - Updated Guidance for BDDS Providers on Temporary Policy Changes Related to COVID-19 and Appendix K -updates to previously issued guidance are noted in red.
  - BDDS temporary policy changes related to COVID-19 FAQ

#### BDDS Temporary Measures to Monitor Closures & Site Restrictions

- Providers should continue to notify us of:
  - Service or Site Closure / Suspensions
  - Visitor restriction
  - Any significant change in service delivery

#### What to Report:

- Services impacted
- Number of individuals impacted
- Estimated closure duration and reason if unknown, plan to evaluate need to reopen
- Reason for Closure Preventative or Confirmed Case
- Alternate Planning, if any
- How individuals and families are / will be notified

#### How/Where to Report:

 E-mail Your Local District Manager or BQIS.Help@fssa.in.gov



- Incident Reports Clarification
  - Incident reports are not required when a person has symptoms of COVID-19, unless another incident report category applies (such as an emergency intervention or event with the potential for causing significant harm or injury and requiring medical or psychiatric treatments or services).
  - Incident reports are not required for COVID-19 related service/site closures/suspensions, visitor restrictions, quarantine measures without a COVID-19 positive test, or other changes in service delivery. Even though these are not required to be reported as incident reports, BDDS and BQIS are requiring providers to inform and update everyone who is a part of the individualized support team of any situation involving an individual, including quarantine measures, restrictions, etc., as well as document all changes.
  - Please continue to submit IRs as appropriate for non-related COVID-19 incidents using these modified timelines.

- Complaint Investigations and CAPs
  - BDDS and BQIS will evaluate the need to extend deadlines on complaint investigation responses and corrective action plans (CAPs) on a case by case basis.
- Day Service Guidance Clarifications
  - Please note, effective April 1, Division of Aging has closed programs supported through Adult Day Services on the A&D and TBI Waivers
  - Programs supported through Adult Day Services on the FSW and CIH Waiver may continue to operate under BDDS's program guidance.

- Use of Telemedicine Clarifications
  - OMPP issued FAQ on Friday - <u>http://provider.indianamedicaid.com/ihcp/Bulletins/BT2020</u> <u>34.pdf</u>
  - For HCBS services and telehealth:
    - At this time, CoreMMIS does NOT allow modifier GT to be billed with HCBS claims. That does not mean HCBS providers cannot provide services via telemedicine. Rather, providers will need to record the service was performed via telemedicine in the patient or providers' record.
  - Added Clarification: The PCISP and/or CCB DOES NOT need to be updated in order to deliver services via telemedicine. The key issue is to ensure documentation is consistent with OMPP and BDDS Guidance.

Structured Family Caregiving required visits can be completed via telemedicine.



- Paid Family Caregivers
  - The flexibilities allowed under Appendix K for families as caregivers must be utilized in response to a COVID-19 related need that creates a temporary, immediate need for intervention and response to ensure an individual's health and safety. In addition, these flexibilities must be utilized within the individual's existing budget.
  - Families and individuals should work with their case manager and team to determine if their current situation falls within the necessary criteria of Appendix K to access any of these flexibilities.

- Paid Family Caregivers (con't)
  - The following questions should be considered in making this decision:
    - Is the disruption in current services due to COVID-19 that creates an immediate need for intervention and response to ensure their health, safety and well-being? (Note: The 'stay at home order,' schools being closed or closures of non-waiver entities are not sole qualifying circumstances.)
    - Is the service critical to the health, safety and well-being of the individual?
    - Use the Integrated Support Star, or other similar tool, to identify other appropriate alternatives that are available to support the individual including other HCBS services, natural supports, technology, etc.
    - Is the temporary, immediate need for intervention and response fall within the purpose and guidelines of home and community based waiver services?

HCBS Flexibilities May Be Considered When:	Other Support Options Should Be Utilized When:
The BDDS provider in the PCISP has	The individual receiving BDDS services is no longer
suspended services due to COVID 19.	attending school in person due to closures due to COVID 19.
The staff for BDDS services in my PCISP aren't	
providing services because they have been expos are ill with COVID 19.	with your local school district in securing those services. For more information or guidance you may contact
<ul> <li>I'm the primary caregiver or legal guardian for th individual with BDDS services and I have been ex</li> </ul>	
or am ill with COVID 19.	<ul> <li>The individual receiving BDDS services is also receiving First Steps services and is no longer</li> </ul>
<ul> <li>I'm an individual receiving BDDS services and have been exposed or am ill with COVID 19.</li> </ul>	19.
	First Steps services are covered by IDEA. Telehealth might be an option. Contact your First Steps service coordinator for options.
	<ul> <li>The individual receiving BDDS services can no longer attend ABA services because the center closed to due COVID 19.</li> </ul>
	ABA is not a waiver service and is covered by your Medicaid State Health plan and/or private insurance. Contact your ABA provider for their alternate options of service delivery, if any.
	<ul> <li>The individual receiving BDDS services and/or the parents and legal guardians have lost their job due COVID 19 and need assistance meeting basic needs.</li> </ul>
	Individuals and families who are facing a financial hardship due to COVID-19 and need assistance with basic needs such as food, rent, and utilities should contact 211, visit the food assistance availability map and/or a statewide family/advocacy organization to locate local resources.



- Paid Family Caregivers (con't) If it is determined that these flexibilities are warranted, the following options may be used on temporary basis:
  - Parent(s), stepparent(s), and legal guardian(s) will temporarily be allowed to provide services (as direct support staff via an existing BDDS approved provider) to adults and children who are currently using or have a documented intent to use only the following services:
    - Participant assistance and care (PAC) available on the FSW
    - · Community based habilitation (CHIO) available on the FSW and CIH
    - Residential habilitation and support (RHS) available on the CIH
  - An adult spouse will temporarily be allowed to provide services to an adult individual in the following services:
    - Structured family caregiving (SFC) available on the CIH
    - Participant assistance and care (PAC) available on the FSW
  - The 40-hour-per-week paid caregiver limitation will be temporarily waived for
    - Participant assistance and care (PAC) available on the FSW
    - Residential habilitation and support (RHS) available on the CIH
  - Respite services may temporarily be allowed when the adult individual is receiving the following services:
    - Structured family caregiving (SFC) available on the CIH
    - · Rent and Food for Unrelated Caregiver



- Paid Family Caregivers (con't)
  - Any parent(s), stepparent(s), legal guardian(s), and spouse accessing these flexibilities for the first time will need to work with their provider to meet the provider, state and/or federal hiring and training requirements. All paid family caregivers must also meet background check requirements currently in place for direct service professionals.
  - As a reminder, respite care services are provided as temporary relief to those unpaid persons normally providing care - as such, those unpaid persons normally providing care CAN NOT be authorized to provide respite.
  - Existing services are those services that have been authorized in the current Cost Comparison Budget as of March 1, 2020.
  - Remember these changes are temporary, must meet a COVID-19 related need and be used within the current waiver budget.

### BDDS Temporary Policy Guidance FAQs and Scenarios

• Four individuals residing in a supported living setting funded through the CIH waiver were receiving Community Hab Group from the same provider prior to the COVID-19 outbreak. Due to the stay at home order, they cannot go to community based locations. The CHG Provider is delivering Community Hab Group in the supported living setting on a temporary basis. Specifically, the provider staff is in the home facilitating an on-line exercise group, virtual tours of the Smithsonian, and an on-line banking class.



### BDDS Temporary Policy Guidance FAQs and Scenarios

• If an individual has Facility Hab 6:1 on his plan but the provider is currently providing the day service at an alternate site and the actual ratio is 4:1. The provider can bill the 4:1 ratio as long as the individual is in agreement, there is adequate room in the individual's budget to allow for the different ratio, and the team is supportive of the change



### BDDS Temporary Policy Guidance FAQs and Scenarios

A minor child is on the FSW and has been utilizing case management and respite services. The mother of individual becomes ill with a presumed positive case of COVID-19 therefore the entire household is guarantined, which includes the father and adult sibling of the individual. The respite direct support professional has refused to come to the home to provide care in an effort to protect themselves from contracting the virus. The father asks the case manager if he can become the paid respite staff since they are unable to currently access the service. The case manager advises the father that respite is not a service that allows for parents to be paid caregivers. The father then asks if they can add PAC to their service plan and become paid staff under PAC. The case manager advises that in order to become a paid parent caregiver the service must be on their plan as of March 1, 2020. The case manager then advised dad that the adult sibling in the home could potentially be hired as the respite care staff which would allow dad to focus on taking care of mom and we soo getting some rest when able. Dad liked this idea and the adult sibling contacted the respite provider to begin their employment process and trainings necessary to be hired.

#### BDDS Temporary Policy Guidance Anticipated Updates / Clarifications

#### Alternate Settings

- BDDS will temporarily expand settings where Structured Family Caregiving (SFC) may be provided. If the support for a participant's Residential Habilitation and Support (RHS) setting is compromised due to COVID-19 related reasons and a direct support staff is residing in the home to ensure continuity of care, BDDS will temporarily allow the RHS setting to be converted to a SFC setting and be provided in the participant's home. This is not a requirement in cases where a direct support staff is temporarily residing in an individual's home, but rather an option for the team to consider, particularly if it is anticipated that direct staff will be residing in the home for longer than 30 days.
- Allowing RHS Reimbursement for Sleep Staff
  - BDDS will temporarily waive current restrictions preventing providers to bill for RHS reimbursement for time when staff/paid caregiver is asleep. Teams must have a discussion and documented approach for planned staff sleep circumstances in short-term situations where no other support options are available or appropriate, and the individual can be appropriately supported. Unplanned sleep time that is not previously discussed and agreed to by the IST is not allowable under this exception.
  - If it is anticipated that staff will remain in an individual's home for an extended period of time (greater than 30 days) due to a COVID-19 related reason, the team can also explore temporarily converting the setting to Structured Family Caregiving.

#### Additional Updates

- Adding Weekly Provider and CM Webinars:
  - April 15<sup>th</sup> from 11 am Noon
    - Registration to be sent today
  - Starting April 22<sup>nd</sup> thru May 20<sup>th</sup>
    - Registration to be sent on April 15<sup>th</sup>
    - Every Wednesday 3:30 pm 4:30 pm
- Waiver Renewal Extension
- Waiver Redesign





BDDS / BQIS Questions:
 BQIS.Help@fssa.in.gov

